### **Exhibit C**

Contact us | Help | Sign in

INFORMATION

CLAIM FORM

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This is the settlement administration website for the Google Book Search Copyright Class Action Settlement. The purpose of this website is to inform you of a proposed Settlement of a class action lawsuit brought by authors and publishers, claiming that Google has violated their copyrights and those of other Rightsholders of <u>Books</u> and <u>Inserts</u> (click for definitions), by scanning their Books, creating an electronic database and displaying short excerpts without the permission of the copyright holders. Google denies the claims. The lawsuit is entitled The Authors Guild, Inc., et al. v. Google Inc., Case No. 05 CV 8136 (S.D.N.Y.) The Court has preliminarily approved the Settlement. For further information, please review the Notice.

- Claim your Books and Inserts: You can do this at any time, but in order to be eligible for Cash Payments for Books, you must complete your Claim Form on or before January 5, 2010.
- Opt out of the Settlement: Must be submitted online or postmarked on or before May 5, 2009
- File an objection or notice of intent to appear at the Fairness Hearing: Must be postmarked on or before May 5, 2009
- Fairness Hearing: June 11, 2009

Claim books and Inserts »

This website is maintained by Rust Consulting, Inc., the Settlement Administrator, with technical support and hosting provided by Google Inc., the defendant in the lawsuit. Please review the <a href="Privacy Policy">Privacy Policy</a> for information concerning the use of any information that you provide through this website. **This is the Only Authorized Website for the Settlement.** Please do not rely upon other sites that may set out different and unauthorized information.

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

booksettlement@rustconsulting.com

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INFORMATION

CLAIM FORM

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### Create a Registry account

In order to participate in and make claims under the Settlement, you must first create an account with the Book Rights Registry ("Registry").

Account-type:

- O Author or author's heir
- Publisher
- O Agent claiming on behalf of one or more authors

Create account

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

	AIM FORM  EMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT	
Create a Registry a		
In order to participate in and n	nake claims under the Settlement, you must first create an account	SIGN IN WITH YOUR ACCOUNT
with the Book Rights Registry (  Account-type:	Author or author's heir	If you have already created an account, <u>sign in</u> to claim and manage your books and Inserts.
needane type.	Publisher     Agent claiming on behalf of one or more authors	PAPER CLAIM FORM
	O'Agent Gamining on benan of one of more authors	If you cannot file a Claim Form online,
Company information		please <u>download a paper Claim Form</u> , or request one from the Settlement
regarding cash payments, mana	act publisher if others claim publisher's books and Inserts and agement of publisher's books and Inserts and revenue models	Administrator at the address below.
relating to use of publisher's bo	ooks and Inserts.	CONTACT INFORMATION
Name of company:		The Settlement Administrator can be contacted at:
Address:		Settlement Administrator
		c/o Rust Consulting, Inc.
City:		PO Box 9364 Minneapolis, MN 55440-9364
State/Province/Region:		UNITED STATES OF AMERICA
Postal/Zip code:		Email: booksettlement@rustconsulting.com
Country/Territory:		
Country/ rerritory.		
Contact information This person is the Registry's co	ntact person at this publisher.	
	muce person at this publisher.	
Given/First name:		
Middle name (optional):		
Family/Last name:		
Title at company:		
Telephone:		
Email address:		
Confirm email address:		
commin cinan adareos.		
	Email address required for online claiming.	
	Otherwise please <u>file a paper Claim Form</u> .	
Time zone:		
	Otherwise please <u>file a paper Claim Form.</u> (GMT-05:00) Eastern Time	
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Tax identification information is not require Registry prior to issuing any pa  U.S. Tax Identification Nune.g. SSN/ITIN/EIN  Non-U.S. tax identifying nucum to the country:  1 lelect to not give this information Each time you sign in, you will!  Username:	Otherwise please file a paper Claim Form.  (GMT-05:00) Eastern Time   **Transition**  d to complete the publisher's claim, but may be required by the syments to the publisher.  aber:  mber:  mber:	
Tax identification information is not require Registry prior to issuing any pa  U.S. Tax Identification Nume.g. SSN/ITIN/EIN  Non-U.S. tax identifying nucountry:  I elect to not give this information Each time you sign in, you will is Username:  Password:	Otherwise please file a paper Claim Form.  (GMT-05:00) Eastern Time   **Transition**  d to complete the publisher's claim, but may be required by the syments to the publisher.  aber:  mber:  mber:	
Tax identification information is not require Registry prior to issuing any pa  ② U.S. Tax Identification Nune.g. SSN/ITIN/EIN  ③ Non-U.S. tax identifying nucountry:  ③ 1 elect to not give this information Each time you sign in, you will lusername:  Password:  Confirm password:	Otherwise please file a paper Claim Form.  (GMT-05:00) Eastern Time   **Transition**  d to complete the publisher's claim, but may be required by the syments to the publisher.  aber:  mber:  mber:	
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Registry prior to issuing any pa  U.S. Tax Identification Nune.g. SSN/ITIN/EIN  Non-U.S. tax identifying nu Country:  I lelect to not give this information Each time you sign in, you will lusername:  Password:  Confirm password:  Security question:  Answer:  Granting others at your  You may allow more than one paccount through individual account through individual accou	Otherwise please file a paper Claim Form.  (GMT-05:00) Eastern Time  Thation  It complete the publisher's claim, but may be required by the syments to the publisher.  The publisher is the publisher.  The publisher is claim, but may be required by the syments to the publisher.  The publisher is claim, but may be required by the syments to the publisher.  The publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is account to become active.  The publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim, but may be required by the syments of the publisher is claim.	
Tax identification information is not require Registry prior to issuing any pa  ② U.S. Tax Identification Nune.g. SSN/ITIN/EIN  ③ Non-U.S. tax identifying nune.g. SSN/ITIN/EIN  ③ Non-U.S. tax identifying nune.g. Sign in information  Each time you sign in, you will lusername:  Password:  Confirm password:  Security question:  Answer:  Granting others at your you may allow more than one paceount through individual account th	Otherwise please file a paper Claim Form.  (GMT-05:00) Eastern Time	

INFORMATION	CLAIM FORM
HOME   SETTLEMENT	T AGREEMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT

#### Create a Registry account

In order to participate in and make claims under the Settlement, you must first create an account with the Book Rights Registry ("Registry").

• Author or author's heir Account-type:

O Publisher

O Agent claiming on behalf of one or more authors

#### **Contact information**

The Registry may need to contact you if others claim your books and Inserts and regarding cash payments, management of your books and Inserts and revenue models relating to use of your books and Inserts.

Given/First name:	
Middle name (optional):	
Family/Last name:	
Address:	
City:	
State/Province/Region:	
Postal/Zip code:	
Country/Territory:	
Гelephone:	
Email address:	
Confirm email address:	
	Email address required for online claiming Otherwise please <u>file a paper Claim Form</u> .
Γime zone:	(GMT-05:00) Eastern Time

#### Tax identification information

This information is not required to complete your claim, but may be required by the Registry prior to issuing any payments to you.

O U.S. Tax Identification Number:	
e.g. SSN/ITIN/EIN	
Non-U.S. tax identifying number	:
Country:	
I elect to not give this information	n at this time.

### Sign in information

Each time you sign in, you will be asked for your username and password.

Username:	
Password:	
Confirm password:	
Security question:	Choose a question
Answer:	

Please edit your account information whenever you move or change your email address.

Create account			

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please download a paper Claim Form, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

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	English	

INFORMATION	<u>CLAIM FORM</u>	
HOME   SETTLEMENT	AGREEMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT	
Create a Regist In order to participate in with the Book Rights Reg  Account-type:	and make claims under the Settlement, you must first create an account gistry ("Registry").  O Author or author's heir	SIGN IN WITH YOUR ACCOUNT  If you have already created an account, sign in to claim and manage your books and Inserts.
	<ul> <li>Publisher</li> <li>Agent claiming on behalf of one or more authors</li> </ul>	PAPER CLAIM FORM
	o contact you if others claim your clients' books and Inserts and regarding nent of your clients' books and Inserts and revenue models relating to use	If you cannot file a Claim Form online, please <u>download a paper Claim Form</u> , or request one from the Settlement Administrator at the address below.
or your chemes books and	a fisci to.	CONTACT INFORMATION
Given/First name:		The Settlement Administrator can be contacted at:
Middle name (optional):		Settlement Administrator c/o Rust Consulting, Inc.
Family/Last name: Company organization:		PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA
Title at company:		Email: booksettlement@rustconsulting.com
Address:		booksettlement@rustconsuiting.com
City:		
State/Province/Region:		
Postal/Zip code:		
Country/Territory:		
Telephone:		
Email address:		
Confirm email address:	Email address required for online claiming. Otherwise please <u>file a paper Claim Form</u> .	
Time zone:	(GMT-05:00) Eastern Time	
Sign in information Each time you sign in, yo	<b>n</b> u will be asked for your username and password.	
Username:		
Password:		
Confirm password:		
Security question:	Choose a question \$	
Answer:		
Please edit your account	information whenever you move or change your email address.	
Create account		

Contact us | Help | Sign in

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INFORMATION

CLAIM FORM

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### Opt out of the Google Book Settlement

If you do not want to be included in the Settlement, you must <u>opt out</u>. By opting out, you retain the right to file your own lawsuit or join a separate lawsuit against Google. If you opt out, you will not be entitled to receive any payments under the Settlement, or take advantage of other Settlement benefits.

In order to opt out, please provide the following information:

Sub-class:

O Author Sub-Class

Publisher Sub-Class

Opt out of the Settlment

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

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Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

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Google Book Settlement	Filed 12/18/08	Page 8	ontatt LS Help   Sig	<u>m</u>
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INFORMATION	CLAIM FORM
HOME   SETTLEMENT	AGREEMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT
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Opt out of the Goog	gle Book Settlement
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If you do not want to be included in the Settlement, you must opt out. By opting out, you retain the right to file your own lawsuit or join a separate lawsuit against Google. If you opt out, you will not be entitled to receive any payments under the Settlement, or take advantage of other Settlement benefits. In order to opt out, please provide the following information: Sub-class: O Author Sub-Class Publisher Sub-Class Company completing this opt-out form Name of company: Address: City: State/Province/Region: Postal/Zip code: Country/Territory: Names of all imprints for books for which the publisher currently owns a U.S. copyright interest: One imprint per line. Contact at company Given/First name: Middle name (optional): Family/Last name: Title at company: Telephone (optional): Email address (optional): **Book and Insert information (optional)** To help the Registry identify your books and Inserts, please provide the following information. Titles of books and Inserts (if appropriate): One title per line. Books published between: and e.g. 1980 and 1984

Opt out of the Settlement

### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

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#### CONTACT INFORMATION

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Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

Fnalish		
English		

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INFORMATION CL	AIM FORM
HOME   SETTLEMENT AGRE	EMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT
If you do not want to be include right to file your own lawsuit or	gle Book Settlement d in the Settlement, you must opt out. By opting out, you retain the rjoin a separate lawsuit against Google. If you opt out, you will not ents under the Settlement, or take advantage of other Settlement
In order to opt out, please prov	ide the following information:
Sub-class:	<ul> <li>◆ Author Sub-Class</li> <li>◆ Publisher Sub-Class</li> </ul>
Person completing this	opt-out form
Given/First name:	
Middle name (optional):	
Family/Last name:	
Capacity:	Author
Contact information Address:	
City:	
State/Province/Region:	
Postal/Zip code:	
Country/Territory:	
Telephone (optional):	
Email address (optional):	
<b>Book and Insert inform</b> To help the Registry identify yo	ation (optional) ur books and Inserts, please provide the following information.
Names/pseudonyms under whi	ch books and Inserts (if appropriate) were published:
One name per line.	
Titles of books and Inserts (if ap	ppropriate):
One title per line.	
Books published between:	e.g. 1980 and 1984
Opt out of the Settlement	

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

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#### CONTACT INFORMATION

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Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

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INFORMATION

CLAIM FORM

HOME | SETTLEMENT AGREEMENT | NOTICE | SUMMARY NOTICE | FAQS | OPT OUT

### The Registry has received your information

Your opt-out information has been received.

#### SIGN IN WITH YOUR ACCOUNT

If you have already created an account, sign in to claim and manage your books and Inserts.

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email

<u>INFORMATION</u>	CLAIM FORM	
MY ACCOUNT   FIN	D AND CLAIM   MAN	NAGE   FAQS   OPT OUT

#### **Edit account information**

#### Company information

The Registry may need to contact publisher if others claim publisher's books and Inserts and regarding cash payments, management of publisher's books and Inserts and revenue models relating to use of publisher's books and Inserts.

Name of company:	Francois Publishing
Address:	25 Orange St
	Suite 300
City:	Brooklyn
State/Province/Region:	NY
Postal/Zip code:	11201
Country/Territory:	USA

### Multiple sign-ins for this account

You may allow more than one person from the publisher to sign into the publisher's Registry account through individual account sign-ins. Contact the Settlement Administrator to add another sign-in or to make changes to these accounts.

Master account na	ime: fr	ancois

Other sign-ins: Noah Whale (noahwhale)

Laura Marling (lauramarling) Jesse Malin (jessem) Johnny Flynn (jflynn)

#### Contact information

Person who is the Registry's contact person at the publisher.

Given/First name:	Frank
Middle name (optional):	Cook
Family/Last name:	Harris
Title at company:	Assistant to the Account Executive
Telephone:	212-333-3333
Time zone:	(GMT-05:00) Eastern Time
Email address:	frank@francois-publishing.com - change email
Change password	

#### Tax identification information

Change security question

This information is not required to complete the publisher's claim, but may be required by the Registry prior to issuing any payments to the publisher.

U.S. Tax Identification Number:     e.g. SSN/ITIN/EIN
○ Non-U.S. tax identifying number:
Country:
• I elect to not give this information at this time.
(Sausa) (Cancel)

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please download a paper Claim Form, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364

Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

 $\textbf{fcharris} \mid \underline{\textbf{Contact us}} \mid \underline{\textbf{Help}} \mid \underline{\textbf{Sign out}}$ 

English 💠

<u>INFORMATION</u>	CLAIM FORM	
MY ACCOUNT   FIN	D AND CLAIM   MAN	JAGE   FAQS   OPT OUT

### **Edit account information**

I elect to not give this information at this time.

Cancel

#### **Contact information**

Civen/First name:

The Registry may need to contact you if others claim your books and Inserts and regarding cash payments, management of your books and Inserts and revenue models relating to use of your books and Inserts.

Given/Tirst hanc.	Frank
Middle name (optional):	Cook
Family/Last name:	Harris
Address:	26 Shad River Rd
City:	Savannah
State/Province/Region:	GA
Postal/Zip code:	30601
Country/Territory:	US
Telephone:	706-111-1111
Time zone:	(GMT−05:00) Eastern Time
Email address:	frank@hirefrank.com - <u>change email</u>
Change password	
Change security question	
Tax identification information is not required to issuing any payments to you.	mation I to complete your claim, but may be required by the Registry prior
O U.S. Tax Identification Numbers of the control of	ber:
○ Non-U.S. tax identifying nur	nber:
Country:	

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:

fcharris | Contact us | Help | Sign out

English \$

<u>INFORMATION</u>	CLAIM FORM	
MY ACCOUNT   FIN	D AND CLAIM   MAN	NAGE   FAQS   OPT OUT

### **Edit account information**

#### Contact information

The Registry may need to contact you if others claim your clients' books and Inserts and regarding cash payments, management of your clients' books and Inserts and revenue models relating to use of your clients' books and Inserts.

Given/First name:	Frank	
Middle name (optional):	Cook	
Family/Last name:	Harris	
Company organization:	East Coast Representation	
Title at company:	Agent	
Address:	26 Shad River Rd	
City:	Savannah	
State/Province/Region:	GA	
Postal/Zip code:	30601	
Country/Territory:	US	
Telephone:	706-111-1111	
Time zone:	(GMT-05:00) Eastern Time	
Email address:	frank@hirefrank.com - change email	
Change password		
Change security question		
Save Cancel		

#### PAPER CLAIM FORM

If you cannot file a Claim Form online, please <u>download a paper Claim Form</u>, or request one from the Settlement Administrator at the address below.

#### CONTACT INFORMATION

The Settlement Administrator can be contacted at:

Settlement Administrator c/o Rust Consulting, Inc. PO Box 9364 Minneapolis, MN 55440-9364 UNITED STATES OF AMERICA

Email:



INFORMATION

CLAIM FORM

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### Account creation pending

We will be emailing instructions on how to access your account within 8 hours. If you have any questions contact the Settlement Administrator.

Fli-b	ntact us	Help	Sign i
	Enalish		

INFORMATION CLAIM FORM
HOME   SETTLEMENT AGREEMENT   NOTICE   SUMMARY NOTICE   FAQS   OPT OUT
Confirm account
Please check your email and enter the confirmation code below to confirm your account. Have you received the email containing the confirmation code? If not, resend email.
Confirmation code:
Submit

fcharris   Col	<u>ntact us</u>   <u>Help</u>   <u>Sign</u>	out
(	English	*

INFORMATION CLAI	M FORM	
MY ACCOUNT   FIND AND CLAIM   MANAGE   FAQS   OPT OUT		
Change email addre	ess	
Current email address:	fcharris@gmail.com	
New email address:		
Confirm new email address:		
Save or back to edit account	nt information	

English	*

INFORMATION CLAIM FORM  MY ACCOUNT   FIND AND CLAIM   MANAGE   FAQS   OPT OUT		
Your changes have been saved back to edit account information		
Change password Current password:		
New password:  Confirm new password:		
Save or back to edit accour	nt information	

fcharris   Col	<u>ntact us</u>   <u>Help</u>   <u>Sign</u>	out
(	English	*

INFORMATION CLAIM FORM  MY ACCOUNT   FIND AND CLAIM   MANAGE   FAQS   OPT OUT		
Your changes have been saved back to edit account information		
Change security question		
Current password:		
Security question:	Choose a question 💠	
Answer:		
_		
Save or back to edit account information		